

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000444

FILED
Apr 04, 2004
Secretary of State

Entity Name: SNYFER PARTNERS LLC

Current Principal Place of Business:

5700 LAKE WORTH RD., STE. 302
LAKE WORTH, FL 33462

New Principal Place of Business:

250 CENTRAL BLVD
205A
JUPITER, FL 33458 US

Current Mailing Address:

5700 LAKE WORTH RD., STE. 302
LAKE WORTH, FL 33462

New Mailing Address:

250 CENTRAL BLVD
205A
JUPITER, FL 33458 US

FEI Number: 47-0914594

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PFEFFER, LOUIS P
5700 LAKE WORTH RD., STE. 302
LAKE WORTH, FL 33462

Name and Address of New Registered Agent:

PFEFFER, LOUIS P
250 CENTRAL BLVD
205A
JUPITER, FL 33458 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/04/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: SNYDER JR, WILLIAM L MEMBER
Address: 4270 SW COUNTRY PL
City-St-Zip: PALM CITY, FL 34990 US

Title: MGR () Change (X) Addition
Name: PFEFFER, LOUIS P MEMBER
Address: 250 CENTRAL BLVD, SUITE 205A
City-St-Zip: JUPITER, FL 33458 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM L SNYDER JR

MEMB

04/04/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date